

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-878)

SERIAL NO. 09185225 FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2		1		1		
3		1		1		
4	2			1		
5	1			1		
6	1			1		
7	1			1		
8	1			1		
9	2			1		
10	2			1		
11	1			1		
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TOTAL IND.	11		1			
TOTAL DEP.	11	10				
TOTAL CLAIMS	12		11			

TOTAL IND.		
TOTAL DEP.		
TOTAL CLAIMS		

\*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS U.S. DEPARTMENT OF COMMERCE

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